

Brisbin Trucking, LLC  
11017 NW Weir RD  
McCune, KS 66753  
620-249-8450



## **Application for 2026 Dust Control**

The Brisbin Trucking Application for 2026 Dust Control consists of the application of ENDDUST, Magnesium Chloride Solution (MgC12) to gravel roads in Crawford County. The application of dust control will not completely eliminate dust. The effectiveness and duration of the dust control treatment is dependent on traffic volumes, weather, thickness of gravel, drainage, etc. Effectiveness will increase with each application as the product develops a residual effect with each treatment.

A single treatment application will be used. The exact date of the treatment will depend on weather conditions and product availability. Our current time frame for application is early June. Flags will be placed the week before application to mark locations of areas to be treated.

### **DO NOT DISTURB MARKER FLAGS!**

The county will make every effort to not disturb treated areas until Fall 2026, but reserve the right to maintain the road at any time it is determined necessary to provide a safe public roadway. Neither refund nor retreatment will be made for shortened dust control treatment life resulting from required road maintenance. Maintenance activities on dust control areas, as with other parts of the county road system, will be solely at the discretion of the Road & Bridge Foreman.

**Please Submit Below Form By May 15<sup>th</sup> 2026**  
**For questions call 620-632-5288**

**Thank you for your continued business!**



Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address to be treated: \_\_\_\_\_

Please detail any special instructions below. Example: "Address does not match area to be treated" or "On corner lot, both roads to be treated," etc.

\_\_\_\_\_  
\_\_\_\_\_

A signed copy of this application and full payment for desired treatment should be sent to:

**Brisbin Trucking, LLC  
11017 NW Weir Rd.  
McCune, KS 66753**

**(Make Check Payable to Brisbin Trucking LLC)**

The cost of this treatment will be \$1.40 per foot with a minimum of 100 feet. (\$1.40 x 100' = \$140.00 minimum)

I/We hereby request that \_\_\_\_\_ feet of dust control agent be applied to the above listed address for treatment. I/We agree to hold Crawford County harmless for failure of this product to control dust. My check for \$ \_\_\_\_\_ is enclosed. **I understand and agree to the terms of the Dust Control Program.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Office Use Only Below:

Payment received: \_\_\_\_\_ (Feet) x \$1.40: \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_